

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC

ADDRESS (number and street)

2350 KERNER BLVD., SUITE 250

Check if different  
than previously  
reported. (ACC)

SAN RAFAEL

CA

94901

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00543371

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15  
Quarterly Report (Q1)
- ☐ July 15  
Quarterly Report (Q2)
- ☐ October 15  
Quarterly Report (Q3)
- ☐ January 31  
Year-End Report (YE)
- ☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)
- ☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)  
(Non-Election Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)  
(Non-Election Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

- ☐ Primary (12P) ☒ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M / D D / Y Y Y Y Y Y  
11 08 2016in the  
State of

CA

(d) 30-Day  
POST-Election  
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y Y Y  
10 01 2016

through

M M / D D / Y Y Y Y Y Y  
10 19 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

GIBSON, HILARY J., , ,

Type or Print Name of Treasurer

Signature of Treasurer

GIBSON, HILARY J., , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
10 24 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
10 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y  
10 / 19 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2016</span>		<span style="border: 1px solid black; padding: 2px;">20732.13</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">3615.00</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">1649.30</span>	<span style="border: 1px solid black; padding: 2px;">62732.17</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">5264.30</span>	<span style="border: 1px solid black; padding: 2px;">83464.30</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	<span style="border: 1px solid black; padding: 2px;">78200.00</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">5264.30</span>	<span style="border: 1px solid black; padding: 2px;">5264.30</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		0	1		2	0	1	6		

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		1	9		2	0	1	6		

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1649.30	62732.17
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1649.30	62732.17
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	1649.30	62732.17
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	1649.30	62732.17
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	1649.30	62732.17

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	78200.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0.00	78200.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	78200.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	1649.30	62732.17
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1649.30	62732.17
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	0.00	0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 12

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BARNES, LESLIE, , ,

Mailing Address 4149 CASPER WAY

City  
NAPAState  
CAZip Code  
94558FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BIOMARIN

Occupation (for Individual)

VP, DEVELOPMENT SCIENCES OPEI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1470.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 14 / 2016

Transaction ID : INCA1347

Amount of Each Receipt this Period

70.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BIENAIME, JEAN JACQUES, , ,

Mailing Address 2510 SKYFARM DR

City

Hillsborough

State

CA

Zip Code

94010

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BIOMARIN

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4032.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 14 / 2016

Transaction ID : INCA1348

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BLUM, ARTHUR, , ,

Mailing Address 9 FAIRVIEW AVE

City

Corte Madera

State

CA

Zip Code

94925

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BIOMARIN

Occupation (for Individual)

VICE PRESIDENT, REGULATORY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 14 / 2016

Transaction ID : INCA1349

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

337.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 12

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLARKE, MICHAEL, , ,**

Mailing Address 700 ILLINOIS STREET #210

City

San Francisco

State

CA

Zip Code

94107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BIOMARIN

Occupation (for Individual)

SVP, PRODUCT DEVELOPMENT

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2261.84

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 14 / 2016

**Transaction ID : INCA1350**

Amount of Each Receipt this Period

115.00



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAVIS, G. ERIC, , ,**

Mailing Address 490 SONOMA MOUNTAIN RD

City

Petaluma

State

CA

Zip Code

94954

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BIOMARIN

Occupation (for Individual)

SVP, GENERAL COUNSEL

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4038.33

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 14 / 2016

**Transaction ID : INCA1351**

Amount of Each Receipt this Period

192.30



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ESCANDON, RAFAEL, , ,**

Mailing Address 43 EDINBURGH ST.

City

SAN FRANCISCO

State

CA

Zip Code

94112

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BIOMARIN

Occupation (for Individual)

VP, DEVELOPMENT SCIENCES OPER

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 14 / 2016

**Transaction ID : INCA1352**

Amount of Each Receipt this Period

100.00



Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

407.30

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 12

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FOUTS, ERIK T., , ,**

Mailing Address 17 BLACK OAK LANE

City  
Novato

State  
CA

Zip Code  
94947

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BIOMARIN

Occupation (for Individual)  
VP, MANUFACTURING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1590.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 14 / 2016

Transaction ID : INCA1353

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FUCHS, HENRY J., , ,**

Mailing Address 57 AVILA STREET

City

SAN FRANCISCO

State

CA

Zip Code

94123

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BIOMARIN

Occupation (for Individual)  
EVP, CHIEF MEDICAL OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3150.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 14 / 2016

Transaction ID : INCA1354

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOLD, DANIEL S., , ,**

Mailing Address 3223 SANTIAGO STREET

City

SAN FRANCISCO

State

CA

Zip Code

94116

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BIOMARIN

Occupation (for Individual)  
VP, PROCESS SCIENCES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 14 / 2016

Transaction ID : INCA1355

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

280.00



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 12

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GRASS, JOSHUA, , ,

Mailing Address 196 CASTLE HILL RANCH ROAD

City  
WALNUT CREEKState  
CAZip Code  
94595FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BIOMARINOccupation (for Individual)  
SVP, BUSINESS & CORPORATE DEV

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1575.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 14 / 2016

Transaction ID : INCA1356

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HITCHNER, KENNETH, , ,

Mailing Address 777 BUENA VISTA ST

City  
Moss BeachState  
CAZip Code  
94038FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BIOMARINOccupation (for Individual)  
VP, DEVELOPMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 14 / 2016

Transaction ID : INCA1357

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LO SCALZO, PHILIP, , ,

Mailing Address 448 IGNACIO BLVD., #346

City  
NovatoState  
CAZip Code  
94949FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BIOMARINOccupation (for Individual)  
SVP, CORPORATE COMPLIANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 14 / 2016

Transaction ID : INCA1358

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

140.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 12  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MUELLER, BRIAN, , ,**

Mailing Address 22 OLIVE

City

Larkspur

State

CA

Zip Code

94939

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BIOMARIN

Occupation (for Individual)

GVP, CONTROLLER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2016

**Transaction ID : INCA1359**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NOONBERG, SARAH, , ,**

Mailing Address 105 DIGITAL DRIVE

City

NOVATO

State

CA

Zip Code

94707

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BIOMARIN

Occupation (for Individual)

GVP, HEAD OF CLINICAL DEVELOPM

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2016

**Transaction ID : INCA1360**

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. O'NEILL, CHARLES, , ,**

Mailing Address PO BOX 170

City

Vineburg

State

CA

Zip Code

95487

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BIOMARIN

Occupation (for Individual)

VP, PHARMACOLOGICAL SCIENCE

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2016

**Transaction ID : INCA1361**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

240.00

**TOTAL** This Period (last page this line number only)..... ►

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 12  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name</p> <p><b>A. PALLANSCH, PATRICK, , ,</b></p> <p>Mailing Address PO BOX 668</p>			<p>Date of Receipt</p> <p>M M / D D / Y Y Y Y Y Y 10 / 14 / 2016</p> <p><b>Transaction ID : INCA1362</b></p>	
<p>City</p> <p>LOPEZ ISLAND</p>	<p>State</p> <p>WA</p>	<p>Zip Code</p> <p>98261</p>	<p>Amount of Each Receipt this Period</p> <p>20.00</p>	
<p>FEC ID number of contributing federal political committee.</p> <p>C</p>			<p><input type="checkbox"/> Memo Item</p>	
<p>Name of Employer (for Individual)</p> <p>BIOMARIN</p>		<p>Occupation (for Individual)</p> <p>VP, MEDICAL AFFAIRS</p>		
<p>Receipt For:</p> <p><input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Aggregate Year-to-Date ▼</p> <p>420.00</p>		
<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name</p> <p><b>B. SIMPSON, CAMILLA, , ,</b></p> <p>Mailing Address 770 LINDARO ST.</p>			<p>Date of Receipt</p> <p>M M / D D / Y Y Y Y Y Y 10 / 14 / 2016</p> <p><b>Transaction ID : INCA1363</b></p>	
<p>City</p> <p>San Rafael</p>	<p>State</p> <p>CA</p>	<p>Zip Code</p> <p>94901</p>	<p>Amount of Each Receipt this Period</p> <p>50.00</p>	
<p>FEC ID number of contributing federal political committee.</p> <p>C</p>			<p><input type="checkbox"/> Memo Item</p>	
<p>Name of Employer (for Individual)</p> <p>BIOMARIN</p>		<p>Occupation (for Individual)</p> <p>GVP GLOBAL REGULATORY AFFAIR</p>		
<p>Receipt For:</p> <p><input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Aggregate Year-to-Date ▼</p> <p>850.00</p>		
<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name</p> <p><b>C. SLUZKY, VICTORIA, , ,</b></p> <p>Mailing Address 29 MADERA DEL PRESIDIO DRIVE</p>			<p>Date of Receipt</p> <p>M M / D D / Y Y Y Y Y Y 10 / 14 / 2016</p> <p><b>Transaction ID : INCA1364</b></p>	
<p>City</p> <p>Corte Madera</p>	<p>State</p> <p>CA</p>	<p>Zip Code</p> <p>94925</p>	<p>Amount of Each Receipt this Period</p> <p>75.00</p>	
<p>FEC ID number of contributing federal political committee.</p> <p>C</p>			<p><input type="checkbox"/> Memo Item</p>	
<p>Name of Employer (for Individual)</p> <p>BIOMARIN</p>		<p>Occupation (for Individual)</p> <p>GVP, QUALITY AND PROCESS DEVEI</p>		
<p>Receipt For:</p> <p><input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify)</p>		<p>Aggregate Year-to-Date ▼</p> <p>1500.00</p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional).....▶</p>			<p>145.00</p>	
<p><b>TOTAL</b> This Period (last page this line number only).....▶</p>				

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 OF 12

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPIEGELMAN, DANIEL, , ,**

Mailing Address 201 STANFORD AVE

City  
Palo Alto

State  
CA

Zip Code  
94306

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BIOMARIN

Occupation (for Individual)

EXECUTIVE VICE PRESIDENT, CHIEF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2016

**Transaction ID : INCA1365**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TENEROWICZ, ROBERT, , ,**

Mailing Address 10 Magee Court

City  
Moraga

State  
CA

Zip Code  
94556

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BioMarin

Occupation (for Individual)

VP, Supply Chain and Logistics

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2016

**Transaction ID : INCA1366**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

100.00

1649.30